

CLAIMS

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | |
|--------------|----------|------|------------------------|------|------------------------|------|
| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
| 1 | 1 | | 1 | | 1 | |
| 2 | | 1 | | 1 | | 1 |
| 3 | | 1 | | 1 | | 1 |
| 4 | | 1 | | 1 | | 1 |
| 5 | | 1 | | 1 | | 1 |
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| 7 | | 1 | | 1 | | 1 |
| 8 | | 1 | | 1 | | 1 |
| 9 | | 1 | | 1 | | 1 |
| 10 | | 1 | | 1 | | 1 |
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| TOTAL IND. | | 1 | | 2 | | 1 |
| TOTAL DEP. | | 12 | | 22 | | 1 |
| TOTAL CLAIMS | | 13 | | 24 | | 1 |

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| TOTAL IND. | | | | | | |
| TOTAL DEP. | | | | | | |
| TOTAL CLAIMS | | | | | | |

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS